


PTO/SB/22 (10-04)

Approved for use through 7/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (fees effective on or after October 1, 2004)		Docket Number (Optional) 252312005706	
Application Number 09/753,350		Filed December 29, 2000	
For CONJUGATES OF T CELL EPITOPE DEFICIENT IMMUNOGEN ANALOGS FOR HUMORAL ANERGY AND CHEMICALLY DEFINED NON-POLYMERIC VALENCY PLATFORM MOLECULES			
Art Unit 1644		Examiner P. Huynh	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
		<u>Fee</u>	<u>Small Entity Fee</u>
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$120.00	\$60.00
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$450.00	\$225.00
<input checked="" type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1020.00	\$510.00
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1,590.00	\$795.00
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2,160.00	\$1,080.00
<input checked="" type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27.		
<input type="checkbox"/>	A check in the amount of the fee is enclosed.		
<input type="checkbox"/>	Payment by credit card. Form PTO-2038 is attached.		
<input type="checkbox"/>	The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/>	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>03-1952</u> I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.		
I am the	<input type="checkbox"/>	applicant/inventor.	
	<input type="checkbox"/>	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).	
	<input checked="" type="checkbox"/>	attorney or agent of record. Registration Number <u>43,949</u>	
	<input type="checkbox"/>	attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____	
		<u>12/16/04</u>	
Signature		Date	
<u>John W. Tessman</u>		<u>(650) 813-5786</u>	
Typed or printed name		Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input checked="" type="checkbox"/>	Total of <u>1</u> forms are submitted.		

12/22/2004 CNGUYEN 00000093 031952 09753350

02 FC:2253 510.00 DA